



2023 SPONSOR BENEFITS

Thank you for your interest in sponsoring Walk4ALZ 2023!

As always, every dollar raised will stay local for Alzheimer's support and research.

SPONSORSHIP LEVELS:

	Champion \$25,000	Premium \$15,000	Platinum \$10,000	Gold \$5,000	Silver \$2,500	Bronze \$1,500
VISIBILITY						
Right of first refusal for Walk4ALZ 2024	X					
Sponsor highlight in e-newsletter (sent to list of 35,000)	X					
Logo on print advertising (subject to space availability)	X					
Name in news release to media	X	X	X			
Logo on Walk4ALZ email communication	X	X	X	X		
Logo on all pages of the Walk4ALZ website	X	X	X	X		
Recognition on social media	2	2	1	1		
Logo on final event instructions email	X	X	X	X	X	NAME
WALK DAY						
Opportunity for blog post highlighting company sponsorship	X	X	X			
Logo on official sponsor banner	X	X	X	X	X	
Logo on t-shirt back	X	X	X	X	NAME	NAME
Vendor Booth at Walk	X	X	X	X		
Logo on signage along the route	X	X	X	X	X	NAME
COMPANY ENGAGEMENT						
Lunch & Learn to educate & engage staff	X	X	X	X		
Walk4ALZ T-Shirts	25	15	10	5	3	

Right of first refusal for Walk4ALZ 2023

LEARN MORE ABOUT THE WALK4ALZ:

www.alzsd.org/walk | 858.966.3319 | walk4alz@alzsd.org



Walk4ALZ 2023

CORPORATE PARTNERSHIP AGREEMENT

Company: _____

Contact Person: _____

Address: _____

City: _____ State: _____ ZIP: _____

Phone: _____ Fax: _____

E-mail: _____

Intended Walk(s): _____ \$ Commitment level: _____

Terms & Conditions:

1. Your commitment must be paid in full no later than two weeks after the Walk. Your company will be billed for any remaining balance. It will be due and payable immediately. Please make check payable to Alzheimer's San Diego.
2. The Walk4ALZ is an event of the Alzheimer's SAN DIEGO, a non-profit organization with 501(c)(3) status. Alzheimer's San Diego Tax ID number is 47-5534541
3. Contributors are entitled to benefits associated with the recognized level chosen. The Alzheimer's San Diego reserves the right to make non-material changes to those benefits from time-to-time.
4. Contributors understand that some benefits require artwork. If the info/logos are not provided by the dates needed, a forfeiture of said benefits will result.
5. The Alzheimer's San Diego shall not be responsible for damages resulting from delays or postponements of the Walk4ALZ due to circumstances beyond its control.

AUTHORIZED SIGNATURE	PRINTED NAME	DATE
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- Enclosed is my check made payable to: Alzheimer's San Diego
- Please invoice me. I understand that payment is REQUIRED prior to the event.
- Please charge my credit card: Visa MasterCard AMEX Discover

Name on card: _____ Exp. Date: _____

Card #: _____ Security code: _____

Signature: _____

Billing address: _____

City: _____ State: _____ ZIP: _____

PLEASE EMAIL, FAX, OR MAIL TO:

Alzheimer's San Diego
 3635 Ruffin Road, Ste 300
 San Diego, CA 92123
 Fax: (858) 492-4406

Email: walk4alz@alzsd.org
 (858) 966-3319 | Walk Hotline
www.alzsd.org/walk

